FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 04, 1999 8:00 am Secretary of State

== :=-::=

= :=: :

☐ Addition

☐ Change

Change

03-04-1999 90061 001 ***150.00

DO	CLIN	MENT	#	G69388	þ
		411	$\boldsymbol{\pi}$	COSSOC	ŀ

1. Corporation Name

ROBERT F. WEINER, P.A.

•								
e of Business	Mailing Address		•		1 480 (14) 00 (0 01) (0 (0) (13) (13)	8191 1917 S(81) BIBIL 9	#() #(#)	w: 511 81811 1981
VAY SUITE #100		95 MERRICK WAY SUITE #100 CORAL GABLES FL 33134		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
3 IL 33134								
·	•					,		
Place of Business	2a. Mailing Address			_	4. FEI Number		A	pplied For
	26				59-2362477		N	ot Applicable
#, etc. ************************************	Suite, Apt. #, etc.	-	Ş	-	5. Certifcate of Status Desired	<u> </u>		Additional equired
te	City & State				Election Campaign Financing Trust Fund Contribution	_ ;		May Be to Fees
Country 25	Zip	 -1	ntry		This corporation owes the cur Personal Property Tax.			□XNo
, ,	ent Registered Agent	1			10. Name and Address of New	Registered Age	nt	
	<u> </u>		81	Name				
			82	Street Addr	ess (P.O. Box Number is Not Accep	table)		•
RAL GABLES FL 33134		Ì	83					
to the provisions of Sections 607.05	502 and 607 1508. Florida Statute			City	pration submits this statement for the	FL 8	naina it	Code s registered
to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	e of Florida. Such change was augations of, Section 607.0505, Flor	es, the ab uthorized ida Statu	ove-n by the tes.	named corp e corporation	n's board of directors. Thereby acce	FL	naina it	s renistered
registered agent, or both, in the Stat am familiar with, and accept the oblig Signature, typed or printed name of registered as	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE:	es, the ab uthorized ida Statu	ove-n by the tes.	named corp e corporation	oration submits this statement for the n's board of directors. I hereby access when reinstating) ADDITIONS/CHANGES TO O	purpose of char ept the appointme	nging it	s registered egistered
registered agent, or both, in the Stat am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A	e of Florida. Such change was augations of, Section 607.0505, Flor	es, the abuthorized ida Statut	ove-ri by the tes.	named corp e corporation	t when reinstating)	purpose of charent the appointment the appointment DATE	nging it	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered at OFFICERS A	e of Florida, Such change was at gations of, Section 607.0505, Flor gent and title if applicable. NOTE:	es, the abuthorized ida Statut	hove-nove-nove-nove-nove-nove-nove-nove-n	named corp e corporation	t when reinstating)	purpose of charent the appointment the appointment DATE	nging its	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered at OFFICERS A DP WEINER, ROBERT	e of Florida, Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: ND DIRECTORS DELETE	Registered A	nove-nove-nove-nove-nove-nove-nove-nove-	named corp e corporation	t when reinstating)	purpose of charent the appointment the appointment DATE	nging its	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered at OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE #	e of Florida, Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: ND DIRECTORS DELETE	es, the abuthorized ida Statuli. Registered A 13. 1.1 TITI 1.2 NAI	Agent si	named corp e corporation ignature required	t when reinstating)	purpose of charent the appointment the appointment DATE	nging its	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered at OFFICERS A DP WEINER, ROBERT	e of Florida, Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: ND DIRECTORS DELETE	es, the abuthorized ida Statuli. Registered A 13. 1.1 TITI 1.2 NAI	Agent si	named corp e corporation ignature required	t when reinstating)	purpose of char ept the appointment DATE FFICERS AND D	nging its	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered at OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE #	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS	es, the abuthorized ida Statuti. Registered A 13. 1.1 TITL 1.2 NAM 1.3 STE	Agent si LE ME REET AL Y-ST-Z	named corp e corporation ignature required	d when reinstating)	purpose of char ept the appointment DATE FFICERS AND D	IRECT	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE # CORAL GABLESFL 00000	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	Ropistered / 13. 1.1 TTT 1.2 NAM 1.3 STF 1.4 CIT 2.2 NAM	Agent si	named corpe e corporation ignature requires	when reinsteting) ADDITIONS/CHANGES TO O	purpose of char ept the appointment DATE FFICERS AND D	IRECT	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered at OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE #	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	Ropistered / 13. 1.1 TTT 1.2 NAA 1.3 STF 1.4 CIT 2.2 NAA 2.3 STF	Agent si LE ME REET AL Y-ST-Z LE ME	named corpe e corporation ignature required DDRESS	d when reinstating)	purpose of char ept the appointment DATE FFICERS AND D	IRECT	s registered egistered ORS IN 12
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE # CORAL GABLESFL 00000	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	Ropistered / 13. 1.1 TTT 1.2 NAA 1.3 STF 1.4 CIT 2.2 NAA 2.3 STF	Agent si LE ME REET AL Y-ST-Z LE ME REET AL TY-ST-Z	named corpe e corporation ignature required DDRESS	when reinsteting) ADDITIONS/CHANGES TO O	PL e purpose of charappt the appointme	IRECT	s registered egistered ORS IN 12 Addition
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE # CORAL GABLESFL 00000	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	Rogistered / 13. 1.1 ITTI 1.2 NAM 1.3 STF 1.4 CIT 2.2 NAM 2.3 STF 2.4 CIT 3.1 ITTI	LE ME REET AL	named corpe e corporation ignature required DDRESS	when reinsteting) ADDITIONS/CHANGES TO O	PL e purpose of charappt the appointme	IRECT Change	ors IN 12 Addition
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE # CORAL GABLESFL 00000	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	es, the ab uthorized ida Statul . Registered / . 13. . 1.1 Tm . 1.2 NAA . 1.3 STF . 2.1 Tm . 2.2 NAA . 2.3 STF . 2.4 Cff . 3.1 Tm . 3.2 NAA	Agent si LE ME Y-ST-Z LE ME REET AG ME LE ME ME LE ME	named corpe e corporation ignature required DDRESS	when reinsteting) ADDITIONS/CHANGES TO O	PL e purpose of charappt the appointme	IRECT Change	ors IN 12 Addition
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE # CORAL GABLESFL 00000	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	Registered / 13. 1.1 TITI 1.2 NAA 1.3 STF 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAA 3.3 STF	IOVE-II by this by the	named corpe e corporation ignature required DDRESS ZIP DDRESS	when reinsteting) ADDITIONS/CHANGES TO O	PL e purpose of charappt the appointme	IRECT Change	s registered egistered ORS IN 12 Addition
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE # CORAL GABLESFL 00000	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	Pas, the abuthorized ida Staturia. 13. 1.1 Tm. 1.2 NAA 1.3 STF 2.4 Cm. 2.3 STF 2.4 Cm. 3.3 STF 3.4 Cm. 3.4 Cm.	Agent si LE ME REET AL REET AL TY-ST-Z LE ME REET AL TY-ST-AL REET AL TY-ST-AL	named corpe e corporation ignature required DDRESS ZIP DDRESS	when reinsteting) ADDITIONS/CHANGES TO O	PL a purpose of character the appointment of the	IRECT Change	s registered egistered ORS IN 12 Addition Addition
registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered as OFFICERS A DP WEINER, ROBERT 95 MERRICK WAY SUITE # CORAL GABLESFL 00000	e of Florida. Such change was at gations of, Section 607.0505, Flor gent and title if applicable. (NOTE: AND DIRECTORS DELETE	Registered / 13. 1.1 TITI 1.2 NAA 1.3 STF 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAA 3.3 STF	Agent si LE ME REET AL REET AL TY-ST-Z LE ME REET AL TY-ST-Z LE	named corpe e corporation ignature required DDRESS ZIP DDRESS	when reinsteting) ADDITIONS/CHANGES TO O	PL a purpose of character the appointment of the	inging it in as n	s registered egistered ORS IN 12 Additio
	25	WEINER (AY SUITE #100 S FL 33134 CORAL GABLES FL 33134 US Place of Business 2a. Mailing Address 26 #, etc. 27 te City & State 28 Country Zip 29 9. Name and Address of Current Registered Agent NER, ROBERT F. WERRICK WAY SUITE #100	WEINER (AY SUITE #100	WEINER (AY SUITE #100 S FL 33134 CORAL GABLES FL 33134 US Place of Business (A) Suite #100 CORAL GABLES FL 33134 US Place of Business (B) Suite Apt. #, etc. (C) Suite A	WEINER (AY SUITE #100	Mailing Address WEINER WEINER WAY SUITE #100 S MERRICK WAY SUITE #100 CORAL GABLES FL 33134 US DO NOT WR 3. Date Incorporated or Qualifed 10/07/1983 4. FEI Number 59-2362477 Suite; Apt. #, etc. City & State City & State Country Zip Country Suite; Apt. #, etc. Suite; Apt.	WEINER WEINER WAY SUITE #100 S FL 33134 US Place of Business 2a. Mailing Address 25 Weiner City & State City & State Country Country Zip Country B. This corporation owes the current year Intangil Personal Property Tax. Personal Property Tax. Street Address (P.O. Box Number is Not Acceptable) NER, ROBERT F. WERRICK WAY SUITE #100	WEINER AY SUITE #100 S FL 33134 CORAL GABLES FL 33134 US Place of Business 2a. Mailing Address 26 #, etc. Suite; Apt. #, etc. City & State 28 Country 29 29 30 Name and Address of Current Registered Agent NER, ROBERT F. WERRICK WAY SUITE #100 DO NOT WRITE IN THIS SPACE 10/07/1983 4. FEI Number 4. FEI Number 59-2362477 N Soute; Apt. #, etc. 5. Certificate of Status Desired Fee R 6. Election Campaign Financing Trust Fund Contribution Added Personal Property Tax. Yes 9. Name and Address of Current Registered Agent NER, ROBERT F. WERRICK WAY SUITE #100 DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE 10/07/1983 4. FEI Number 59-2362477 N R 8. To Sertificate of Status Desired Fee R 6. Election Campaign Financing Trust Fund Contribution Added Personal Property Tax. Yes 9. Name and Address of New Registered Agent Name NER, ROBERT F. WERRICK WAY SUITE #100

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empoweled to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

☐ DELETE

☐ DELETE

SIGNATURE:

OTTY ST ZIP

STREET ADDRESS

STREET ADDRESS

OTT: ST ZIP

HILL

Control and the control of the contr

OUROBERT F. WEINER 2/11/99

(305) 444-8181

Daytime Phone #